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K35A0652 **Attorney Docket Number DECLARATION FOR UTILITY OR** ANDREW D. HOSPODOR **First Named Inventor DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Unknown HEREWITH Filing Date Declaration Declaration Submitted OR Submitted after Initial Unknown **Group Art Unit** Filing (surcharge (37 CFR 1.16 (e)) with Initial Unknown Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
DISTRIBUTED RESOURCE RESERVATION SYSTEM FOR ESTABLISHING A PATH THROUGH A MULTI-DIMENSIONAL COMPUTER NETWORK TO SUPPORT ISOCHRONOUS DATA										
the specification of which (Title of the Invention)										
is attached hereto										
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed amended by any amendment speci	and understand the	contents of the above iden		n, including the claims, as						
I acknowledge the duty to disclose i	•		defined in 37 CF	TR 1 56						
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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
				5 5						
			日							
Additional foreign application pun	nhere are listed on a	supplemental priority data	sheet PTO/SR/	128 attached bereto						
□ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Number(s)		(MM/DD/YYYY)	· · · · · · · · · · · · · · · · · · ·	,						
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[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

<u></u>					<u> </u>								
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application.													
U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)					
									:				
Additional	U.S. or f	PCT internationa	l applica	tion numbers ar	e listed on	a supple	emental	priority data	sheet P	TO/SB/	02B attached I	nereto.	
	As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater and Trademark Office connected therewith: Customer Number OR Place Customer Number Bar Code								omer				
			Ø	Registered pra	ctitioner(s)	name/re	egistratio	on number li	sted belo	<u>w</u> L	Label he		
	Nam	e			tration nber			Nan	ne	•	Registration Number		
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Howard H. Sheerin				37									
Additional	registere	practitioner(s)	named c	n supplementa	Registered	l Practit	ioner Int	ormation sh	eet PTO	/\$B/020	C attached here	eto.	
Direct all corr	espond	ence to:		ner Number Code Label				OR	N C	orresp	ondence add	ress below	
Name	Mila	d G. Shara											
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City	Irvin						State ZIP			926	318		
Country	U.S.	.A. Telephone			ne '	(949) 932-5676 Fax (949) 932-5633					3		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:													
Gi	ven Nar	ne (first and n	niddle [if	fanyl)		I		Famil	v Name	or Su	mame .		
ANDREW D.					HOSPODOR								
Inventor's Signature		Mars D. Har				Date 9/2/10					9/2/100		
Residence: City LOS GATOS State CA			Country USA Citizenship USA										
Post Office Address P.O. BOX 1196													
Post Office A	Post Office Address												
City		LOS GATOS	State	CA	ZIP	ZIP 95031-1196 Country USA				SA .			
Additional	invento	rs are being n	amed o	n the <u>1</u> su	pplementa	al Addit	tional Ir	nventor(s)	sheet(s)	PTO/	SB/02A attac	ched hereto	





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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

		-									
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor									rentor		
Given Na		Family Name or Surname									
MICHAEL K.					ENEBOE						
Inventor's Signature	Michael	Vv.	M 3				2) 00 Date 00				
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Post Office Address											
City	SAN JOSE State CA ZIP 95124 Country						Ŀ	USA			
Name of Addition	nal Joint Inventor, if an	ıy:			A petitio	n has been file	ed for this	unsigr	ned inv	rentor	
Given Na	me (first and middle [if any]])				Family Nai	me or Su	ımame			
Inventor's Signature									Date		
Residence: City		State	CA		Country	USA	Citizenship		USA		
Post Office Address											
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City		State	СА		ZIP		Count	ry L	JSA		
Name of Addition	nal Joint Inventor, if an	ıy:			A petition	n has been file	d for this	unsigr	ned inv	entor	
Given Na	me (first and middle [if any]])				Family Nar	me or Su	ırname			
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Inventor's Signature							te				
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